EXPLORING YOUTH APPLICATION



The Exploring Learning for Life career education program is for young men and women who are 14 (and have completed the eighth grade) or 15 through 20 years old.

Exploring's purpose is to provide experiences to help young people mature and become responsible and caring adults. Explorers are ready to explore the meaning of interdependence in their personal relationships.

Exploring is based on a unique and dynamic relationship between youth and the organizations in their communities. Local community organizations initiate a specific Explorer post by matching their people and program resources to the interests of young people in the community. The result is a program of activities that helps youth pursue their special interests, grow, and develop.

Explorer posts can specialize in a variety of career skills. Exploring programs are based upon five areas of emphasis: career opportunities, life skills, citizenship, character education, and leadership experience.



Tips for completing the Application for Exploring Youth Participant:												
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Participant Chart							
Term per month	Youth/adult participant fee						
1	.85						
2	1.70						
3	2.55						
4	3.40						
5	4.25						
6	5.10						
7	5.95						
8	6.80						
9	7.65						
10	8.50						
11	9.35						
12	10.00						

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	TEMPORARY PARTICIPANT CERTIFICATE
	(Good for 60 days)
	This certifies that
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	Post leader signature
	Date
	Exploring • • • • • • • • • • • • • • • • • • •
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VOUTH	USE BLACK OR BLUE INK ONLY.	Post number:
Print—do not use cursive.Print one letter or number		
• Print one letter or number only in each box.	rtificate, participation may be accomplished in this unit by paying \$1 for processing the transfer. Mark and attach certificate. It will be returned by the council.	
Use upper-case	er from council number:	Unit number:
letters and stay within the blue boxes for legibility.	E-mail:	Fill in radio buttons completely.
Name and appress information (Flease pri	tht one letter in each space—press hard, you are making a copy.)	. ,
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Parent/guardian information	O Mark here if address is same as above.	
Select relationship:	t living at the same address; complete and attach a Learning for Life adult application. Orange Parent Orange Grandparent Other (specify)	
First name (Np initials or nicknames)	Middle name Last name	Suffix
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Home phone	Date of birth (mm/dd/yyyy) Occupation Employer	Gender:
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Business phone	Ext. • Make sure you have all needed Cell phone	_
Parent/quardian e-mail address	signatures on application. I have read the attached information sheet and application.	J L L L L L L L L L L L L L L L L L L L
A N Y P A R E N T	@ A N Y E - M A I L A D D R E S S . C O M (signature of parent/guardian required if applicant	(
777	Delroyah Su	t is under 18 years or age). Le Smith
Bill	V I ay Vor Signature of parent/guardian	
Signature of post leader	Date	
	Registration fee \$ Signature of Explorer	

This form is read by machine. Please print the numbers and letters as shown on the sample application.

YOUTH PARTICIPANT

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Post number: